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PROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 276973 1. Corporation Name DES CHAMPS & GREGORY, INC.			
Principal Place of Business 1812 MANATEE AVENUE W. BOX 1101 BRADENTON FL 34206-8101		Mailing Address 1812 MANATEE AVENUE W. BOX 1101 BRADENTON FL 34206-8101	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24 25		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29 30	
9. Name and Address of Current Registered Agent DES CHAMPS, E.S. III 7512 RIVERVIEW DR NW BRADENTON FL 34209		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.			
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	
NAME	GREGORY, STUART	1.2 NAME	
STREET ADDRESS	5225 RIVERVIEW BLVD	1.3 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON, FL 00000	1.4 CITY-ST-ZIP	
TITLE	C	2.1 TITLE	
NAME	DES CHAMPS, ENGLISH	2.2 NAME	
STREET ADDRESS	7512 RIVERVIEW DR	2.3 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON, FL 00000	2.4 CITY-ST-ZIP	
TITLE	VS	3.1 TITLE	
NAME	HAYES, THOMAS R	3.2 NAME	
STREET ADDRESS	2401 LANDING CIRCLE	3.3 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

SIGNATURE:

Stuart Gregory
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/29/99
Date

(941) 748-1812
Daytime Phone #

CR2E034 (11/98)